

February 15, 2016

## **Governor's Budget**

Dear Senator Bye, Representative Walker, and Members of the Appropriations Committee:

The Connecticut Psychological Association (CPA) **opposes elimination of mandated individual health insurance policy coverage for maternal, infant and early childhood home visitation services.** Section 27(b)(8) is deleted from Governor's Bill No. 5049, An Act Eliminating Unnecessary Government Regulation. This section provides:

Sec. 27. Subsection (b) of section 38a-488a of the 2016 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

(b) Each individual health insurance policy providing coverage of the type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469 delivered, issued for delivery, renewed, amended or continued in this state shall provide benefits for the diagnosis and treatment of mental or nervous conditions. Benefits payable include, but need not be limited to:

. . .

[(8)Evidence-based maternal, infant and early childhood home visitation services, as described in Section 2951 of the Patient Protection and Affordable Care Act, P.L. 111-148, as amended from time to time, that are designed to improve health outcomes for pregnant women, postpartum mothers and newborns and children, including, but not limited to, for maternal substance use disorders or depression and relationship-focused interventions for children with mental or nervous conditions or substance use disorders;]

CPA questions whether the elimination of this section is a violation of parity. In addition, maternal, infant and early childhood home visitation services provide an important function in high risk communities.



## According to the Connecticut Office of Early Childhood's website:

The purpose of [maternal, infant and early childhood home visitation services] is to implement, expand and/or enhance high quality evidenced-based home visiting programs for children and families who reside in high-risk communities. Through continued collaboration with multiple state agencies and private partners, Connecticut will build a quality, comprehensive statewide early childhood system for pregnant women, parents/caregivers, and children from birth to age eight and ultimately, to improve health and development outcomes.

## The Village website further provides:

The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program provides pregnant women and first-time mothers with assistance and support to help promote positive parenting skills and reduce the incidences of child abuse and neglect. Program staff engages and supports parents before the birth of their child through weekly home visits, parent education and guidance, and social support to promote maternal and child health and foster child development during the crucial early years of life. Staff also work closely with fathers as they transition into parenthood and their new role with the baby. Opportunities for peer interactions are provided through monthly support groups for the families. These groups are individualized to meet the needs of the enrolled families.

The importance of this program was further underscored by the recommendation of the US Preventive Services Task Force in late January, in acknowledgment of the high incidence of unrecognized depression in pregnant and post-partum women, that all adults be screened for depression, with a particular emphasis on pregnant and post-partum women.

http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/depression-in-adults-screening1

Thank you for your recognition of the parity implications of the removal of this provision, as well as for supporting these important services.